

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF OHIO

Case number (if known)

Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

02/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name The Beacon Journal Publishing Company

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 34-1095666

4. Debtor's address Principal place of business

44 E. Exchange Street
Akron, OH 44309

Number, Street, City, State & ZIP Code

Summit
County

Mailing address, if different from principal place of business

#210- 15288 54A Avenue
SURREY, BC V3S 5X7

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

7. Describe debtor's business A. Check one:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Railroad (as defined in 11 U.S.C. § 101(44))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))

☒ None of the above

B. Check all that apply

☐ Tax-exempt entity (as described in 26 U.S.C. §501)

☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)

☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

5111

8. Under which chapter of the Bankruptcy Code is the debtor filing? Check one:

☒ Chapter 7

☐ Chapter 9

☐ Chapter 11. Check all that apply:

☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).

☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.

☐ A plan is being filed with this petition.

☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.

☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? ☒ No.

☐ Yes.

If more than 2 cases, attach a separate list.

District	When	Case number
District	When	Case number

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☒ No

☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	Relationship	
District	When	Case number, if known

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors**☐ 1-49☐ 50-99☒ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☒ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☒ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor The Beacon Journal Publishing Company
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

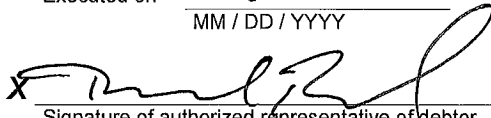
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

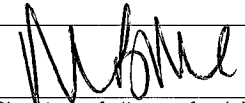
Executed on 10 30 2020
MM / DD / YYYY


Signature of authorized representative of debtor

David Black
Printed name

Title President

18. Signature of attorney

X 
Signature of attorney for debtor

Date 11/03/2020
MM / DD / YYYY

Marc B. Merklin 0018195
Printed name

Brouse McDowell, LPA
Firm name

388 S. Main Street, Suite 500
Akron, OH 44311
Number, Street, City, State & ZIP Code

Contact phone 330-535-5711

Email address mmerklin@brouse.com

0018195 OH
Bar number and State

Fill in this information to identify the case:

Debtor name The Beacon Journal Publishing Company

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

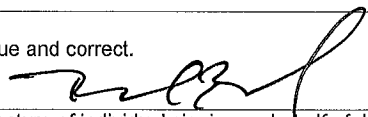
I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10-30-2020

X


Signature of individual signing on behalf of debtor

David Black

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:Debtor name **The Beacon Journal Publishing Company**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **294,000.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **294,000.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **56,063,909.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **76,428,314.95****4. Total liabilities**
Lines 2 + 3a + 3b\$ **132,786,223.95**

Fill in this information to identify the case:Debtor name **The Beacon Journal Publishing Company**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B**
Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☒ No. Go to Part 2.
☐ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments**13. Does the debtor own any investments?**

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

		Valuation method used for current value	Current value of debtor's interest
14.	Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock:		
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture Name of entity:	% of ownership	
	Ownership interest in Akron Development		
15.1.	Fund I, Ltd.	5.405% % Book Value	\$294,000.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (If known) _____

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$294,000.00

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☐ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor The Beacon Journal Publishing Company
Name

Case number (if known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$294,000.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$294,000.00</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$294,000.00</u>

Fill in this information to identify the case:

Debtor name The Beacon Journal Publishing Company

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

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☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	
<u>\$556,000.00</u>	<u>Unknown</u>

2.1 Canadian Imperial Bank of Commerce

Creditor's Name

**199 Bay Street, 4th Floor
TORONTO ON M5L 1A2**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No
- ☒ Yes. Specify each creditor, including this creditor and its relative priority.
- Priority over working capital assets. Computershare Trust has priority over remaining assets.

Describe debtor's property that is subject to a lien

UCC Lien - All assets of debtor, whether now owned or hereafter acquired.

Describe the lien

Consensual Lien

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☐ No
- ☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

2.2 Computershare Trust Company of Canada

Creditor's Name

**100 University Avenue,
11th Floor
TORONTO ON M5J 2Y1**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Describe debtor's property that is subject to a lien

UCC Lien - All assets of debtor, whether now owned or hereafter acquired or in which debtor otherwise has rights, and all proceeds thereof. Computershare Trust has priority over all assets with the exception of the working capital assets.

Describe the lien

Consensual Lien

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☐ No
- ☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

\$55,507,909.00

Unknown

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

Priority over all assets except working capital assets. Canadian Imperial Bank has priority over working capital assets.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$56,063,909.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name **The Beacon Journal Publishing Company**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	\$0.00	\$0.00
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred		
	Basis for the claim: NOTICE ONLY		
	Last 4 digits of account number		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		
2.2	Priority creditor's name and mailing address Internal Revenue Service Insolvency Group 6 1240 E. Ninth Street, Room 493 Cleveland, OH 44199	\$0.00	\$0.00
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred		
	Basis for the claim: NOTICE ONLY		
	Last 4 digits of account number		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

2.3 Priority creditor's name and mailing address

**Kristen M. Scalise CPA, CFE
Summit County Fiscal Officer
175 S. Main Street, Suite 320
Akron, OH 44308-1353**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00 \$0.00

Date or dates debt was incurred

Basis for the claim:
NOTICE ONLY

Last 4 digits of account number

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2.4 Priority creditor's name and mailing address

**Ohio Attorney General
Attn: Bankruptcy Staff
150 E. Gay Street, 21st Floor
Columbus, OH 43215**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00 \$0.00

Date or dates debt was incurred

Basis for the claim:
NOTICE ONLY

Last 4 digits of account number

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2.5 Priority creditor's name and mailing address

**Ohio Bureau of Workers'
Compensatio
Attn: Law Section Bankruptcy Unit
PO Box 15567
Columbus, OH 43215-0567**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Unknown \$0.00

Date or dates debt was incurred

Basis for the claim:
NOTICE ONLY

Last 4 digits of account number

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2.6 Priority creditor's name and mailing address

**Ohio Department of Job & Family
Svc
Attn: Revenue
Recovery/Contribution
PO Box 182404
Columbus, OH 43218-2404**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00 \$0.00

Date or dates debt was incurred

Basis for the claim:
NOTICE ONLY

Last 4 digits of account number

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

2.7 Priority creditor's name and mailing address

**Ohio Department of Taxation
Attn: Bankruptcy Division
PO Box 530
Columbus, OH 43216-0530**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00 \$0.00

Date or dates debt was incurred

Basis for the claim:

NOTICE ONLY

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

- ☒ No
☐ Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

**Abbott, Robert E.
1461 Deermont SW
Massillon, OH 44647**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00

Date(s) debt was incurred

Basis for the claim: Retiree

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

3.2 Nonpriority creditor's name and mailing address

**Aetna
PO Box 88874
Chicago, IL 60695-1874**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$13,796.50

Date(s) debt was incurred

Basis for the claim: Premium

Last 4 digits of account number 0001

Is the claim subject to offset? ☒ No ☐ Yes

3.3 Nonpriority creditor's name and mailing address

**Akron Beacon Journal Guild Plan and
c/o Eben O. McNair, IV
Schwarzwald McNair & Fusco LLP
1215 Superior Avenue, Suite 225
Cleveland, OH 44114**

As of the petition filing date, the claim is: *Check all that apply.*

- ☒ Contingent
☐ Unliquidated
☐ Disputed

\$0.00

Date(s) debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

3.4 Nonpriority creditor's name and mailing address

**Allessie, James
1519 Hunters Lake Drive East
Cuyahoga Falls, OH 44221**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00

Date(s) debt was incurred

Basis for the claim: Retiree

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

3.5 Nonpriority creditor's name and mailing address

**Bailey, Richard H.
1375 Sacket Hills Drive
Akron, OH 44313**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$0.00

Date(s) debt was incurred

Basis for the claim: Retiree

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.6	Nonpriority creditor's name and mailing address Baird, Doyle F. 4270 Woodedge Blvd. Akron, OH 44319 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.7	Nonpriority creditor's name and mailing address Baker, Rand L. 955 Annapolis Avenue Akron, OH 44310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.8	Nonpriority creditor's name and mailing address Barone, Anthony 4710 Black Walnut lane Ravenna, OH 44266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.9	Nonpriority creditor's name and mailing address Bechler, Gerhard 1979 Liberty Rd Stow, OH 44224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.10	Nonpriority creditor's name and mailing address Beck, Arthur 976 Cree Avenue Akron, OH 44305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.11	Nonpriority creditor's name and mailing address Berdis, Robert 5251 Ray Street Norton, OH 44203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.12	Nonpriority creditor's name and mailing address Black Press Group Ltd. 210-15288 54A Avenue Surrey BC V3S 5X7 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198,926.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.13 Nonpriority creditor's name and mailing address

Blaner, Daniel P.
836 Canna Circle
Barberton, OH 44203

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.14 Nonpriority creditor's name and mailing address

Bok, Arthur
709 Castle Blvd.
Akron, OH 44313

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.15 Nonpriority creditor's name and mailing address

Boone, Ralph
PO Box 843
Akron, OH 44309

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.16 Nonpriority creditor's name and mailing address

Bowman, Ronald G.
529 Lehman Street
Orrville, OH 44667

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.17 Nonpriority creditor's name and mailing address

Brookover, Fred W.
568 Sand Ridge Road, Lot 7
Conway, SC 29526

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.18 Nonpriority creditor's name and mailing address

Buck, Richard O.
1145 Sulphur Springs Lane
Mineral Ridge, OH 44440

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.19 Nonpriority creditor's name and mailing address

Butash, Jonathan
799 Zeletta
Akron, OH 44319

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.20	Nonpriority creditor's name and mailing address Byrd, William 4855 Pond Drive NW North Canton, OH 44720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.21	Nonpriority creditor's name and mailing address Campbell, John W. 659 Palisades Drive, Apt. 7 Akron, OH 44303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.22	Nonpriority creditor's name and mailing address CBIZ Retirement Plan Services 6050 Oak Tree Blvd., Suite 500 Independence, OH 44131 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$235.00
3.23	Nonpriority creditor's name and mailing address Chester, Theodore 522 Pershing Avenue SE North Canton, OH 44720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.24	Nonpriority creditor's name and mailing address Clapp, Alfred P. 3515 71st Avenue E Ellenton, FL 34222 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.25	Nonpriority creditor's name and mailing address Clapsaddle, Judith A. 746 State Mill Road Akron, OH 44319 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.26	Nonpriority creditor's name and mailing address Clark, Donald 255 N. Portage Path, Apt. 101 Akron, OH 44303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.27	Nonpriority creditor's name and mailing address Cole, Patrick 279 Winchester Road Fairlawn, OH 44333 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.28	Nonpriority creditor's name and mailing address Coletta, Maxwell E. 855 W. Desert View Lane Yuma, AZ 85364 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.29	Nonpriority creditor's name and mailing address Collins, Eunice E. 1031 Edgemere Court #1 Akron, OH 44321 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.30	Nonpriority creditor's name and mailing address Conway, Michael T. 8254 Fairmount Rd Novelty, OH 44072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.31	Nonpriority creditor's name and mailing address Cook, Tommie 1111 Independence Avenue #2506 Akron, OH 44310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.32	Nonpriority creditor's name and mailing address Corall, Robert E. 1650 Evergreen Ave Akron, OH 44301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.33	Nonpriority creditor's name and mailing address Costello, John A. 1335 Linden Avenue Akron, OH 44310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.34 Nonpriority creditor's name and mailing address

Craig, Terry
2812 Fairview Place
Cuyahoga Falls, OH 44221

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.35 Nonpriority creditor's name and mailing address

Craven, William E.
6097 Taylor Rd
Clinton, OH 44216

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.36 Nonpriority creditor's name and mailing address

Crawley, Richard F.
729 N. Sheraton Dr
Akron, OH 44319

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.37 Nonpriority creditor's name and mailing address

Cummins, John
1556 Hyde Park
Akron, OH 44310

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.38 Nonpriority creditor's name and mailing address

Davis, George W.
1043 Pheasant Grove NW
Massillon, OH 44646

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.39 Nonpriority creditor's name and mailing address

Delta Dental
PO Box 75688
Seattle, WA 98175

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.40 Nonpriority creditor's name and mailing address

Deskovich, Robert J.
29 E. Woodsdale Ave
Akron, OH 44301

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.41	Nonpriority creditor's name and mailing address Dietz, Helen 2371 Elizabeth Dr Stow, OH 44224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.42	Nonpriority creditor's name and mailing address Dilbeck, Leroy C. 980 Hampton Ridge Dr Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.43	Nonpriority creditor's name and mailing address Dimauro, Anthony G. 4430 Forest Glen Ave Massillon, OH 44647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.44	Nonpriority creditor's name and mailing address Dipietro, Joseph 683 Grace Drive Wadsworth, OH 44281 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.45	Nonpriority creditor's name and mailing address Dougherty, John P. 1830 Chestnut Blvd. Cuyahoga Falls, OH 44223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.46	Nonpriority creditor's name and mailing address Doyle, Jack E. 3501 Millpond Rd Charlotte, NC 28226 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.47	Nonpriority creditor's name and mailing address Earlenbaugh, Dennis 261 Hawk Avenue Akron, OH 44312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.48	Nonpriority creditor's name and mailing address Employee's Retirement Plan of the Beacon Journal Publishing Company Wells Fargo Bank, N.A., Trustee Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,724,046.00
3.49	Nonpriority creditor's name and mailing address Epstein, Stephen 623 Fairhill Drive Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.50	Nonpriority creditor's name and mailing address Fair, Richard L. 279 Sobul Avenue Akron, OH 44305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.51	Nonpriority creditor's name and mailing address Figgers, Jolene 5529 Lance Road Medina, OH 44256 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.52	Nonpriority creditor's name and mailing address Flower, Jerry W. 5083 Fox Cliff Drive Lakeland, FL 33810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.53	Nonpriority creditor's name and mailing address Forgus, Jerry 1029 W. Riddle Avenue Ravenna, OH 44266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.54	Nonpriority creditor's name and mailing address Fox, Craig A. 1536 Wayne Street Barberton, OH 44203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.55	Nonpriority creditor's name and mailing address Frient, John A. 3785 N. Vista NW, Apt. N Uniontown, OH 44685 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.56	Nonpriority creditor's name and mailing address Gangl, Ottmar J. 3186 S. Jackson Blvd. Uniontown, OH 44685 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.57	Nonpriority creditor's name and mailing address GCIU - Employer Retirement Fund 13191 Crossroads Pkwy N. Suite 205 City of Industry, CA 91746-3434 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$768,960.59
<hr/>			
3.58	Nonpriority creditor's name and mailing address Gid, Marion 2173 Lynnwood Stow, OH 44224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.59	Nonpriority creditor's name and mailing address Gracco, Felix 2902 Oakwood Dr Willoughby Hills, OH 44094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.60	Nonpriority creditor's name and mailing address Graham, Andrew D. 331 Simcox Street Wadsworth, OH 44281 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.61	Nonpriority creditor's name and mailing address Graphic Arts Industry Joint Pension Trust 25 Louisiana Ave NW Washington, DC 20001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125,988.88

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.62	Nonpriority creditor's name and mailing address Graphics Communications Conference of Int'l Brotherhood of Teamsters 455 Kehoe Blvd., Suite 101 Carol Stream, IL 60188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74,403.93
3.63	Nonpriority creditor's name and mailing address Greene, Larnie W. 1398 Cosmos Street NW Hartville, OH 44632 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.64	Nonpriority creditor's name and mailing address Gregorio, Anthony 5073 Shepherd's Glen Willoughby, OH 44094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.65	Nonpriority creditor's name and mailing address Gresock, Richard J. 760 Remsen Road Medina, OH 44256 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.66	Nonpriority creditor's name and mailing address Griffin, Robert J. 5843 Renninger Road, Apt. 216 Akron, OH 44319 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.67	Nonpriority creditor's name and mailing address Grna, Jr., Paul D. 812 Jonathan Ave Akron, OH 44306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.68	Nonpriority creditor's name and mailing address Haines, Hershel L. 1225 McKinley Avenue Akron, OH 44306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.69 Nonpriority creditor's name and mailing address

Hawk, Donald K.
365 Crestwood Ave
Wadsworth, OH 44281

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.70 Nonpriority creditor's name and mailing address

Hayes, Arthur T.
10135 Gate Parkway N., #510
Jacksonville, FL 32246

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.71 Nonpriority creditor's name and mailing address

Hazel, Jerry P.
217 E. State Street
Barberton, OH 44203

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.72 Nonpriority creditor's name and mailing address

Health Equity
15 W. Scenic Pointe Drive, Ste 100
Draper, UT 84020

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.73 Nonpriority creditor's name and mailing address

Heinbuch, Henry D.
182 Sycamore Drive, NW
North Canton, OH 44720

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.74 Nonpriority creditor's name and mailing address

Heinbuch, William H.
3531 Curtis Street
Mogadore, OH 44260

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.75 Nonpriority creditor's name and mailing address

Herold, Jerry
61 Stratford Rd
Hudson, OH 44236

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.76	Nonpriority creditor's name and mailing address Hillsheimer, Willard L. 322 8th Street Nokomis, FL 34275 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<hr/>			
3.77	Nonpriority creditor's name and mailing address Hine, Kay 3532 Hammond Blvd Copley, OH 44321 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<hr/>			
3.78	Nonpriority creditor's name and mailing address Hine, Ronald L. 3532 Hammond Blvd. Akron, OH 44321 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<hr/>			
3.79	Nonpriority creditor's name and mailing address Holcomb, Douglas L. 1388 Brown Street Akron, OH 44301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<hr/>			
3.80	Nonpriority creditor's name and mailing address Howell, Robert L. 222 Kenwick Drive Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<hr/>			
3.81	Nonpriority creditor's name and mailing address Hudgins, Keith 167 Killian Rd Akron, OH 44319 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<hr/>			
3.82	Nonpriority creditor's name and mailing address Hunter Consulting Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,054.44</u>

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known) _____

3.83 Nonpriority creditor's name and mailing address

Hunter, William G.
4678 Whyem Drive
Akron, OH 44319

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.84 Nonpriority creditor's name and mailing address

Johnson, Donald E.
6798 Evergreen Rd
Hudson, OH 44236

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.85 Nonpriority creditor's name and mailing address

Jones, Lucille
3031 13th Street
Cuyahoga Falls, OH 44223

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.86 Nonpriority creditor's name and mailing address

Jones, Merle O.
1778 Northampton Road, Apt. A9
Akron, OH 44313

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.87 Nonpriority creditor's name and mailing address

Kanter, Theodore A.
232 Acme Drive
Akron, OH 44319

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.88 Nonpriority creditor's name and mailing address

Kay, Daniel
c/o Michael R. Blum, CPA
7220 Cottesmore Lane
Solon, OH 44139

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.89 Nonpriority creditor's name and mailing address

Keller, Alvern H.
9331 Broadland St., NW
Massillon, OH 44646

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.90	Nonpriority creditor's name and mailing address Kight, Chester 578 Colchester Court Akron, OH 44319 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.91	Nonpriority creditor's name and mailing address King, Glenn M. 1032 Sycamore Lane Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.92	Nonpriority creditor's name and mailing address Kling, Herbert P. 1323 Woodward Place NW Canton, OH 44709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.93	Nonpriority creditor's name and mailing address Knapp, Ronald P. 3992 Sappwood Dr Ravenna, OH 44266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.94	Nonpriority creditor's name and mailing address Kovach, Paul D. 27 Wilpark Drive Akron, OH 44312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.95	Nonpriority creditor's name and mailing address LaBelle, Edward F. 157 Court Drive, Apt. 157 Akron, OH 44333 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.96	Nonpriority creditor's name and mailing address Lammerding, Elizabeth 1376 Hampton Knoll Drive Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**

Name

Case number (if known)

3.97 Nonpriority creditor's name and mailing address

Laplaca, Michael
1273 S. Velvior Blvd.
Cleveland, OH 44121

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.98 Nonpriority creditor's name and mailing address

Lazoran, Dennis P.
1469 Alphada Avenue, Apt. C3
Akron, OH 44310

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.99 Nonpriority creditor's name and mailing address

Leeders-Wright, Diane
600 Greenmeadow Avenue NW
Canton, OH 44709

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.100 Nonpriority creditor's name and mailing address

Leland, Robert B.
413 Stinaff Street
Kent, OH 44240

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.101 Nonpriority creditor's name and mailing address

Lemons, Dennis A.
108 Furnace Run Drive
Akron, OH 44307

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.102 Nonpriority creditor's name and mailing address

Lewis, David J.
2059 6th Street, SW
Akron, OH 44314

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.103 Nonpriority creditor's name and mailing address

Lillis, Steve
1495 Radford Street, NE
North Canton, OH 44720

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: RetireeIs the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.104 Nonpriority creditor's name and mailing address

Lynch, Diane P.
686 Center Road
Akron, OH 44319

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.105 Nonpriority creditor's name and mailing address

Markley, Larry D.
265 Franklin Drive
Doylestown, OH 44230

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.106 Nonpriority creditor's name and mailing address

Marshall, Thomas C.
12945 Jamestown Rd
Uniontown, OH 44685

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.107 Nonpriority creditor's name and mailing address

Mattern, Norman E.
43215 Hammond School Rd
Wellsville, OH 43968

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.108 Nonpriority creditor's name and mailing address

Mayiras, James J.
6740 W. Smith Road
Medina, OH 44256

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.109 Nonpriority creditor's name and mailing address

McCann, Paul
164 Stockwell Court
Wadsworth, OH 44281

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.110 Nonpriority creditor's name and mailing address

McDowell, William
2403 E. 27th Terrace
Lawrence, KS 66046

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.111	Nonpriority creditor's name and mailing address McEanney, Dennis 404 Stanton Avenue, Apt. 1 Akron, OH 44301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.112	Nonpriority creditor's name and mailing address McHargh, Winston J. 740 City View Street Akron, OH 44307 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.113	Nonpriority creditor's name and mailing address McMillion, Melanie 1408 Hidden Spring Lane Two Harbors, MN 55616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.114	Nonpriority creditor's name and mailing address Mellinger, Sr., Glenn E. 3344 Townsend Street NW Uniontown, OH 44685 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.115	Nonpriority creditor's name and mailing address Memmer, Ronald E. 225 Homewood Avenue Akron, OH 44312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.116	Nonpriority creditor's name and mailing address Meredith, Richard 641 Palmetto Avenue Akron, OH 44306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.117	Nonpriority creditor's name and mailing address Miller, Lynnette 623 Kipling Street Akron, OH 44311 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.118	Nonpriority creditor's name and mailing address Mitchin, Robert J. 2325 Wilmington Avenue SE Massillon, OH 44646 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.119	Nonpriority creditor's name and mailing address Moore, Thomas 669 Davis Street Akron, OH 44310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.120	Nonpriority creditor's name and mailing address Moyers, Robert E. 28 Rocking Horse Drive Palm Coast, FL 32164 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.121	Nonpriority creditor's name and mailing address Murphy, Ocie 2402 Laguna Court Stockton, CA 95206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.122	Nonpriority creditor's name and mailing address Musarra, Rosario 8916 Falcon Drive Streetsboro, OH 44241 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.123	Nonpriority creditor's name and mailing address Myers, Steven G. 2775 Martin Rd Mogadore, OH 44260 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.124	Nonpriority creditor's name and mailing address Nelson, Carl G. 8640 Scenic Ridge Ave Clinton, OH 44216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.125 Nonpriority creditor's name and mailing address

Nicholls, Joseph G.
4765 Morningside Drive
Cleveland, OH 44109

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.126 Nonpriority creditor's name and mailing address

Nichols, Alan
263 High Street
Wadsworth, OH 44281

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.127 Nonpriority creditor's name and mailing address

O'Flanagan, Michael
281 W. Boston Mills Rd
Peninsula, OH 44264

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.128 Nonpriority creditor's name and mailing address

O'Neil, Charles E.
427 Edgewood Ave
Akron, OH 44307

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.129 Nonpriority creditor's name and mailing address

Olesky, John
217 N. Thomas Road
Tallmadge, OH 44278

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.130 Nonpriority creditor's name and mailing address

Pariso, Steven M.
6395 Grove Road
Clinton, OH 44216

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.131 Nonpriority creditor's name and mailing address

Patterson, Joe D.
414 Trunko Rd
Akron, OH 44333

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.132 Nonpriority creditor's name and mailing address

**Pension Benefit Guaranty Corporatio
1200 K. Street, NW
Washington, DC 20005-4026**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.133 Nonpriority creditor's name and mailing address

**Petush, William K.
1157 Biscayne Drive
Port Charlotte, FL 33953**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.134 Nonpriority creditor's name and mailing address

**Phillips, Donald J.
219 Chart Rd
Cuyahoga Falls, OH 44223**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.135 Nonpriority creditor's name and mailing address

**Porter, Michael L.
844 Bridlewood Drive
Copley, OH 44321**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.136 Nonpriority creditor's name and mailing address

Post Retirement Benefit Obligations

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Various Providers

Is the claim subject to offset? ☒ No ☐ Yes

\$10,620,080.53

3.137 Nonpriority creditor's name and mailing address

**Poteete, Wayne I.
1148 W. Market Street, #406
Akron, OH 44313**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.138 Nonpriority creditor's name and mailing address

**Prim, Joseph
441 Mineola Avenue
Akron, OH 44320**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.139 Nonpriority creditor's name and mailing address

**Regence Group Administrators
PO Box 52890
Bellevue, WA 98015-2890**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.140 Nonpriority creditor's name and mailing address

**Roese, Donald A.
500 Keenan Ave
Cuyahoga Falls, OH 44221**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.141 Nonpriority creditor's name and mailing address

**Rollison, George
4204 Ledgewater Dr
Mogadore, OH 44260**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.142 Nonpriority creditor's name and mailing address

**Rothermel, Ronald
482 Highland Ave
Wadsworth, OH 44281**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.143 Nonpriority creditor's name and mailing address

**Russo, David D.
931 Robinson Ave
Barberton, OH 44203**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.144 Nonpriority creditor's name and mailing address

**Sabo, Joseph T.
175 Canton Rd
Akron, OH 44312**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.145 Nonpriority creditor's name and mailing address

**Sanderlin, Ronald W.
60 South Street, Apt. 10
Concord, NH 03301**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.146	Nonpriority creditor's name and mailing address Sandrene, Steven M. 1936 20th Street Cuyahoga Falls, OH 44223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.147	Nonpriority creditor's name and mailing address Sav-Rx PO Box 8 Fremont, NE 68026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Claims</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,243.94
3.148	Nonpriority creditor's name and mailing address Sav-Rx PO Box 8 Fremont, NE 68026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Broker Fee</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,560.00
3.149	Nonpriority creditor's name and mailing address Scheu, John T. 438 Auburndale Ave Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.150	Nonpriority creditor's name and mailing address Schlimm, Joseph S. 3112 Englewood Drive Silver Lake, OH 44224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.151	Nonpriority creditor's name and mailing address Schmook, Charles A. 915 Decker Dr Parma, OH 44134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.152	Nonpriority creditor's name and mailing address Seaburn, John R. 13621 Peppertree NW Mogadore, OH 44260 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.153	Nonpriority creditor's name and mailing address Shaffer, Halley F. 3305 Elmwood Street Cuyahoga Falls, OH 44221 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.154	Nonpriority creditor's name and mailing address Shaw, James L. 4473 Sugar Grove Road Cambridge, OH 43725 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.155	Nonpriority creditor's name and mailing address Shelton, Arthur M. 845 Storer Avenue Akron, OH 44320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.156	Nonpriority creditor's name and mailing address SilverScript Insurance PO Box 840240 Dallas, TX 75284-0240 Date(s) debt was incurred ____ Last 4 digits of account number <u>3912</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Member Plan Premiums - August 20 Med D Premiums</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$257.12
<hr/>			
3.157	Nonpriority creditor's name and mailing address Smith, Terry 8741 Elmfield Avenue Canal Fulton, OH 44614 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.158	Nonpriority creditor's name and mailing address Sneed, Launa 1359 Arnold Avenue Akron, OH 44305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.159	Nonpriority creditor's name and mailing address Sound Publishing, Inc. 1800 41st Street, Suite 300 Everett, WA 98203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,855,285.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.160	Nonpriority creditor's name and mailing address Sowd, David H. 7036 Brandy Circle NW North Canton, OH 44720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.161	Nonpriority creditor's name and mailing address Sprague, Jr., Sidney H. 3332 Crowley Circle Loveland, CO 80538 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.162	Nonpriority creditor's name and mailing address Stamp, Lewis K. 247 Aqua Blvd Akron, OH 44319 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.163	Nonpriority creditor's name and mailing address Steadman, Clarence J. 410 Briarwood Drive Akron, OH 44320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.164	Nonpriority creditor's name and mailing address Teamsters Union, Local No. 703 Health and Welfare Fund 6511 Eastland Road, Ste 140 Brookpark, OH 44142 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>August Coverage Payments</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,755.90</u>
3.165	Nonpriority creditor's name and mailing address Thom, Dan W. 2044 Longfellow Street NE Canton, OH 44721 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.166	Nonpriority creditor's name and mailing address Thomas, Forest W. 211 Melbourne Ave Akron, OH 44313 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retiree</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known)

3.167 Nonpriority creditor's name and mailing address

Thomas, Nicholas S.
30215 Ashton Lane
Bay Village, OH 44140

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.168 Nonpriority creditor's name and mailing address

Thombs, Ora E.
828 Eastview Ave
Wadsworth, OH 44281

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.169 Nonpriority creditor's name and mailing address

Thornburg, John R.
4640 Taray Lane
Holiday, FL 34690

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.170 Nonpriority creditor's name and mailing address

Tobias, John D.
2517 Enclave Street, NW
Uniontown, OH 44685

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

3.171 Nonpriority creditor's name and mailing address

UnitedHealth Group
PO Box 29875
Hot Springs, AR 71903-0875

Date(s) debt was incurred

Last 4 digits of account number 5014

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

\$2,534.70

3.172 Nonpriority creditor's name and mailing address

UnitedHealthcare
AARP - Group Retiree Services
PO Box 371362
Pittsburgh, PA 15250-7362

Date(s) debt was incurred

Last 4 digits of account number 1269

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Premium

Is the claim subject to offset? ☒ No ☐ Yes

\$2,011.75

3.173 Nonpriority creditor's name and mailing address

Vancant, Larry E.
1215 Romaine Drive
Akron, OH 44313

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Debtor **The Beacon Journal Publishing Company**
Name

Case number (if known) _____

3.174 Nonpriority creditor's name and mailing address

**VSP
3333 Quality Drive
Rancho Cordova, CA 95670**

Date(s) debt was incurred _____

Last 4 digits of account number **3868**

As of the petition filing date, the claim is: *Check all that apply.*

\$174.67

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Vision Care**

Is the claim subject to offset? ☒ No ☐ Yes

3.175 Nonpriority creditor's name and mailing address

**Walker, Robert K.
1258 Herberich Avenue
Akron, OH 44301**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Retiree**

Is the claim subject to offset? ☒ No ☐ Yes

3.176 Nonpriority creditor's name and mailing address

**Welch III, Frederick S.
1519 Artman Ave
Akron, OH 44313**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Retiree**

Is the claim subject to offset? ☒ No ☐ Yes

3.177 Nonpriority creditor's name and mailing address

**Wenger, Paul J.
5660 Easton Street
Louisville, OH 44641**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Retiree**

Is the claim subject to offset? ☒ No ☐ Yes

3.178 Nonpriority creditor's name and mailing address

**West, Ruth M.
15539 Hatfield
Rittman, OH 44270**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Retiree**

Is the claim subject to offset? ☒ No ☐ Yes

3.179 Nonpriority creditor's name and mailing address

**Williams, David
705 Robins Gate
Akron, OH 44319**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Retiree**

Is the claim subject to offset? ☒ No ☐ Yes

3.180 Nonpriority creditor's name and mailing address

**Wise, Kathleen
8587 Tanglewood Trail
Chagrin Falls, OH 44023**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Retiree**

Is the claim subject to offset? ☒ No ☐ Yes

Debtor The Beacon Journal Publishing Company
Name

Case number (if known) _____

3.181 Nonpriority creditor's name and mailing address

Wright, James R.
1251 Delia Avenue
Akron, OH 44320

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: Retiree

Is the claim subject to offset? ☒ No ☐ Yes

\$0.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the
related creditor (if any) listed?

Last 4 digits of
account number, if
any

4.1 **Sav-Rx**
224 N. Park Avenue
Fremont, NE 68025

Line 3.147

☐ Not listed. Explain _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 76,428,314.95
5c.	\$ 76,428,314.95

Fill in this information to identify the case:

Debtor name The Beacon Journal Publishing Company

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:Debtor name The Beacon Journal Publishing CompanyUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	311773 B.C. Ltd.	210-15288 54A Avenue Surrey, BC V3S 5X7	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2	311773 B.C. Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3	Black Press Delaware LLC	c/o The Corporation Trust Company Corporation Trust Center 1209 Orange Street Wilmington, DE 19801	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4	Black Press Delaware LLC	c/o The Corporation Trust Company Corporation Trust Center 1209 Orange Street Wilmington, DE 19801	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor The Beacon Journal Publishing Company

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: Codebtor

Column 2: Creditor

2.5	Black Press Group Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.6	Black Press Group Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	Black Press Group Oregon LLC	3175 Beach Drive VICTORIA BC V8R 6L7 CAN	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	Black Press Group Oregon LLC	3175 Beach Drive VICTORIA BC V8R 6L7 CAN	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.9	Black Press Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.10	Black Press Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.11	Central Web Offset Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.12	Central Web Offset Ltd.	210-15288 54A Avenue SURREY BC V3S 5X7	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Debtor The Beacon Journal Publishing Company

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: Codebtor

Column 2: Creditor

2.13	Oahu Publications, Inc.	500 Ala Moana Blvd. #7-210 Honolulu, HI 96813	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.14	Oahu Publications, Inc.	500 Ala Moana Blvd #7-210 Honolulu, HI 96813	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.15	San Francisco Print Media Company	835 Market Street, Suite 550 San Francisco, CA 94103	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.16	San Francisco Print Media Company	835 Market Street, Suite 550 San Francisco, CA 94103	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.17	Sound Publishing Holding, Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.18	Sound Publishing Holding, Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.19	Sound Publishing Properties, Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.20	Sound Publishing Properties, Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Debtor The Beacon Journal Publishing Company

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: Codebtor

Column 2: Creditor

2.21	Sound Publishing, Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.22	Sound Publishing, Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.23	WWA (BPH) Publications, Inc.	PO Box 930 Everett, WA 98206-0930	Canadian Imperial Bank of Commerce	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.24	WWA (BPH) Publications, Inc.	PO Box 930 Everett, WA 98206-0930	Computershare Trust Company of Canada	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Fill in this information to identify the case:Debtor name The Beacon Journal Publishing CompanyUnited States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2020** to **Filing Date****Sources of revenue**
Check all that apply☐ Operating a business☒ Other **No Operations****Gross revenue**
(before deductions and exclusions)**\$0.00****For prior year:**From **1/01/2019** to **12/31/2019**☐ Operating a business☒ Other **No Operations****\$0.00****For year before that:**From **1/01/2018** to **12/31/2018**☒ Operating a business☐ Other _____**\$33,659,028.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**For prior year:**From **1/01/2019** to **12/31/2019****Lease Payments from Gatehouse (May through October)****\$153,129.00****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. GateHouse Media 175 Sullys Trail Pittsford, NY 14534	July 16, 2020	\$23,683.81	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Real estate taxes</u>
3.2. Cox Taylor 26 Bastion Square Third Floor Burnes House Victoria BC V8W 1H9	7/29/2020	\$12,500.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.3. Cushman & Wakefield 3 Summit Park Drive Suite 200 Cleveland, OH 44131	7/29/2020	\$64,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ____
3.4. Kristen M. Scalise CPA, CFE Summit County Fiscal Officer 175 S. Main Street, Suite 320 Akron, OH 44308-1353	7/29/2020	\$91,903.14	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Real estate taxes</u>
3.5. First American Title Insurance Company 611 Commerce Street, Ste 3101 Nashville, TN 37203	7/29/2020	\$9,968.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Title / Escrow fees</u>
3.6. Ohio Bureau of Workers' Compensation Attn: Law Section Bankruptcy Unit PO Box 15567 Columbus, OH 43215-0567	9/2/2020	\$279,794.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Transferred Huntington National Bank account balance to Coastal Community Bank for new LOC with the OBWC</u>
3.7. Computershare Trust Company of Canada 100 University Avenue, 11th Floor TORONTO ON M5J 2Y1		\$929,150.70	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount

may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Ribar v. Akron Beacon Journal, et al. CV 19 919222	Negligence / Employer Liability (Motion filed on July 7, 2020, to substitute defendant Akron Beacon Journal for Beacon Journal Publishing Co.)	Cuyahoga County Court of Common Pleas Civil Division Justice Center 1200 Ontario Street, 1st Flr Cleveland, OH 44113	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Brouse McDowell, LPA 388 S. Main Street, Suite 500 Akron, OH 44311	\$7,500 fees; \$335 filing fee	6/10/2020	\$7,835.00
Email or website address <u>www.brouse.com</u>			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	ABJ Building, LLC 402 Office Park Drive, Suite 150 Birmingham, AL 35223	44 E. Exchange St., Akron, OH, PN 6749247 - building and lot; 41 E. Exchange St., Akron, OH, PN 6819364 - parking lot; E. Exchange St., Akron, OH, PN 6819365 - parking lot; S. Broadway St., Akron, OH, PN 6762551 - parking lot; (See attached legal description)	7/29/2020	\$1,107,524.59
	Relationship to debtor N/A			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.

☒ Yes. Fill in below:

Name of plan Employees' Retirement Plan of the Beacon Journal Publishing Company	Employer identification number of the plan EIN: 91-1396047
--	--

Has the plan been terminated?

- ☒ No
☐ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Huntington National Bank 919 5th Avenue Huntington, WV 25701	XXXX-3557	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	9/3/2020	\$279,794.50
18.2.	Huntington National Bank 919 5th Avenue Huntington, WV 25701	XXXX-1916	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	7/20/2020	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
---	--	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.
25.1. Akron Development Fund I, Ltd. 388 S. Main Street, Suite 500 Akron, OH 44311	It makes loans for economic development in Greater Akron, Summit Co. area	Dates business existed EIN: 34-1879325 From-To 1998 to current

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. Chris Leighton #210-15288 54A Avenue SURREY BC V3S 6T4	February 2018 to current
26a.2. Bruce Tennant #210-15288 54A SURREY BC V3S 6T4	2006 - 2018
26a.3. Tim Betz 44 E. Exchange Street Akron, OH 44328	2014 - 2018

Name and address	Date of service From-To
26a.4. Roger Messmore 44 E. Exchange Street Akron, OH 44328	2006 - 2014

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. KPMG 800-730 View Street VICTORIA BC V8W 3Y7	1997 to current

Name and address	Date of service From-To
26b.2. RSM 1001 Lakeside Avenue, E., Suite 200 Cleveland, OH 44114	2018 to current

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Chris Leighton #210-15288 54A Avenue SURREY BC V3S 6T4	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. Computershare Trust Company of Canada 100 University Avenue, 11th Floor TORONTO ON M5J 2Y1
26d.2. Canadian Imperial Bank of Commerce 199 Bay Street, 4th Floor TORONTO ON M5L 1A2
26d.3. Bank of America 181 Bay Street, Suite 3660 TORONTO ON M5J 2T3

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Sound Publishing Inc.	1800 41st Street, Suite 300 Everett, WA 98203	Stockholder	100%
Name	Address	Position and nature of any interest	% of interest, if any
David Black	3175 Beach Drive VICTORIA BC V6L 4N4	Director	None
Name	Address	Position and nature of any interest	% of interest, if any
Dennis Francis	500 Ala Moana Blvd., #7-210 Honolulu, HI 96813	Director	None

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Sound Publishing Holding Inc.	EIN: 04-3672263

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
Employees' Retirement Plan of the Beacon Journal Publishing Company	EIN: 91-1396047

Debtor The Beacon Journal Publishing Company

Case number (if known) _____

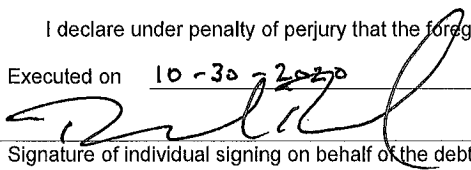
Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10-30-2020


Signature of individual signing on behalf of the debtor

David Black
Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

United States Bankruptcy Court
Northern District of Ohio

In re The Beacon Journal Publishing Company

Debtor(s)

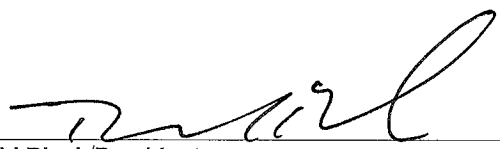
Case No.
Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: 10-30-2020



David Black/President
Signer/Title

The Beacon Journal Publishing Company -

311773 B.C. Ltd.
210-15288 54A Avenue
Surrey, BC V3S 5X7

311773 B.C. Ltd.
210-15288 54A Avenue
SURREY BC V3S 5X7

Abbott, Robert E.
1461 Deermont SW
Massillon, OH 44647

Aetna
PO Box 88874
Chicago, IL 60695-1874

Akron Beacon Journal Guild Plan and
c/o Eben O. McNair, IV
Schwarzwald McNair & Fusco LLP
1215 Superior Avenue, Suite 225
Cleveland, OH 44114

Allessie, James
1519 Hunters Lake Drive East
Cuyahoga Falls, OH 44221

Bailey, Richard H.
1375 Sacket Hills Drive
Akron, OH 44313

Baird, Doyle F.
4270 Woodedge Blvd.
Akron, OH 44319

Baker, Rand L.
955 Annapolis Avenue
Akron, OH 44310

Barone, Anthony
4710 Black Walnut lane
Ravenna, OH 44266

Bechler, Gerhard
1979 Liberty Rd
Stow, OH 44224

The Beacon Journal Publishing Company -

Beck, Arthur
976 Cree Avenue
Akron, OH 44305

Berdis, Robert
5251 Ray Street
Norton, OH 44203

Black Press Delaware LLC
c/o The Corporation Trust Company
Corporation Trust Center
1209 Orange Street
Wilmington, DE 19801

Black Press Group Ltd.
210-15288 54A Avenue
Surrey BC V3S 5X7

Black Press Group Ltd.
210-15288 54A Avenue
SURREY BC V3S 5X7

Black Press Group Oregon LLC
3175 Beach Drive
VICTORIA BC V8R 6L7 CAN

Black Press Ltd.
210-15288 54A Avenue
SURREY BC V3S 5X7

Blaner, Daniel P.
836 Canna Circle
Barberton, OH 44203

Bok, Arthur
709 Castle Blvd.
Akron, OH 44313

Boone, Ralph
PO Box 843
Akron, OH 44309

Bowman, Ronald G.
529 Lehman Street
Orrville, OH 44667

The Beacon Journal Publishing Company -

Brookover, Fred W.
568 Sand Ridge Road, Lot 7
Conway, SC 29526

Buck, Richard O.
1145 Sulphur Springs Lane
Mineral Ridge, OH 44440

Butash, Jonathan
799 Zeletta
Akron, OH 44319

Byrd, William
4855 Pond Drive NW
North Canton, OH 44720

Campbell, John W.
659 Palisades Drive, Apt. 7
Akron, OH 44303

Canadian Imperial Bank of Commerce
199 Bay Street, 4th Floor
TORONTO ON M5L 1A2

CBIZ Retirement Plan Services
6050 Oak Tree Blvd., Suite 500
Independence, OH 44131

Central Web Offset Ltd.
210-15288 54A Avenue
SURREY BC V3S 5X7

Central Web Offset Ltd.
210-15288 54A Avenue
SURREY BC V3S 5X7

Chester, Theodore
522 Pershing Avenue SE
North Canton, OH 44720

Clapp, Alfred P.
3515 71st Avenue E
Ellenton, FL 34222

The Beacon Journal Publishing Company -

Clapsaddle, Judith A.
746 State Mill Road
Akron, OH 44319

Clark, Donald
255 N. Portage Path, Apt. 101
Akron, OH 44303

Cole, Patrick
279 Winchester Road
Fairlawn, OH 44333

Coletta, Maxwell E.
855 W. Desert View Lane
Yuma, AZ 85364

Collins, Eunice E.
1031 Edgemere Court #1
Akron, OH 44321

Computershare Trust Company of Canada
100 University Avenue, 11th Floor
TORONTO ON M5J 2Y1

Conway, Michael T.
8254 Fairmount Rd
Novelty, OH 44072

Cook, Tommie
1111 Independence Avenue #2506
Akron, OH 44310

Corall, Robert E.
1650 Evergreen Ave
Akron, OH 44301

Costello, John A.
1335 Linden Avenue
Akron, OH 44310

Craig, Terry
2812 Fairview Place
Cuyahoga Falls, OH 44221

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6097 Taylor Rd
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Crawley, Richard F.
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Akron, OH 44319

Cummins, John
1556 Hyde Park
Akron, OH 44310

Davis, George W.
1043 Pheasant Grove NW
Massillon, OH 44646

Delta Dental
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Dietz, Helen
2371 Elizabeth Dr
Stow, OH 44224

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980 Hampton Ridge Dr
Akron, OH 44313

Dimauro, Anthony G.
4430 Forest Glen Ave
Massillon, OH 44647

Dipietro, Joseph
683 Grace Drive
Wadsworth, OH 44281

Dougherty, John P.
1830 Chestnut Blvd.
Cuyahoga Falls, OH 44223

The Beacon Journal Publishing Company -

Doyle, Jack E.
3501 Millpond Rd
Charlotte, NC 28226

Earlenbaugh, Dennis
261 Hawk Avenue
Akron, OH 44312

Employee's Retirement Plan of the
Beacon Journal Publishing Company
Wells Fargo Bank, N.A., Trustee

Epstein, Stephen
623 Fairhill Drive
Akron, OH 44313

Fair, Richard L.
279 Sobul Avenue
Akron, OH 44305

Figgers, Jolene
5529 Lance Road
Medina, OH 44256

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5083 Fox Cliff Drive
Lakeland, FL 33810

Forgus, Jerry
1029 W. Riddle Avenue
Ravenna, OH 44266

Fox, Craig A.
1536 Wayne Street
Barberton, OH 44203

Frient, John A.
3785 N. Vista NW, Apt. N
Uniontown, OH 44685

Gangl, Ottmar J.
3186 S. Jackson Blvd.
Uniontown, OH 44685

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13191 Crossroads Pkwy N.
Suite 205
City of Industry, CA 91746-3434

Gid, Marion
2173 Lynnwood
Stow, OH 44224

Gracco, Felix
2902 Oakwood Dr
Willoughby Hills, OH 44094

Graham, Andrew D.
331 Simcox Street
Wadsworth, OH 44281

Graphic Arts Industry Joint
Pension Trust
25 Louisiana Ave NW
Washington, DC 20001

Graphics Communications Conference
of Int'l Brotherhood of Teamsters
455 Kehoe Blvd., Suite 101
Carol Stream, IL 60188

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1398 Cosmos Street NW
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Medina, OH 44256

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Akron, OH 44306

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1225 McKinley Avenue
Akron, OH 44306

Hawk, Donald K.
365 Crestwood Ave
Wadsworth, OH 44281

Hayes, Arthur T.
10135 Gate Parkway N., #510
Jacksonville, FL 32246

Hazel, Jerry P.
217 E. State Street
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Health Equity
15 W. Scenic Pointe Drive, Ste 100
Draper, UT 84020

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182 Sycamore Drive, NW
North Canton, OH 44720

Heinbuch, William H.
3531 Curtis Street
Mogadore, OH 44260

Herold, Jerry
61 Stratford Rd
Hudson, OH 44236

Hilsheimer, Willard L.
322 8th Street
Nokomis, FL 34275

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Philadelphia, PA 19101-7346

Internal Revenue Service
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6798 Evergreen Rd
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3031 13th Street
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Kay, Daniel
c/o Michael R. Blum, CPA
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Summit County Fiscal Officer
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North Canton, OH 44720

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Mattern, Norman E.
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Memmer, Ronald E.
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Miller, Lynnette
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Akron, OH 44311

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O'Flanagan, Michael
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O'Neil, Charles E.
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#7-210
Honolulu, HI 96813

The Beacon Journal Publishing Company -

Oahu Publications, Inc.
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Columbus, OH 43215

Ohio Bureau of Workers' Compensation
Attn: Law Section Bankruptcy Unit
PO Box 15567
Columbus, OH 43215-0567

Ohio Department of Job & Family Svc
Attn: Revenue Recovery/Contribution
PO Box 182404
Columbus, OH 43218-2404

Ohio Department of Taxation
Attn: Bankruptcy Division
PO Box 530
Columbus, OH 43216-0530

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Rothermel, Ronald
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Sabo, Joseph T.
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Sav-Rx
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Fremont, NE 68025

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Silver Lake, OH 44224

Schmook, Charles A.
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Parma, OH 44134

Seaburn, John R.
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Mogadore, OH 44260

Shaffer, Halley F.
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Shaw, James L.
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Akron, OH 44320

SilverScript Insurance
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Dallas, TX 75284-0240

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Canal Fulton, OH 44614

Sneed, Launa
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Akron, OH 44305

Sound Publishing Holding, Inc.
1800 41st Street, Suite 300
Everett, WA 98203

Sound Publishing Properties, Inc.
1800 41st Street, Suite 300
Everett, WA 98203

Sound Publishing, Inc.
1800 41st Street, Suite 300
Everett, WA 98203

Sowd, David H.
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North Canton, OH 44720

Sprague, Jr., Sidney H.
3332 Crowley Circle
Loveland, CO 80538

Stamp, Lewis K.
247 Aqua Blvd
Akron, OH 44319

Steadman, Clarence J.
410 Briarwood Drive
Akron, OH 44320

The Beacon Journal Publishing Company -

Teamsters Union, Local No. 703
Health and Welfare Fund
6511 Eastland Road, Ste 140
Brookpark, OH 44142

Thom, Dan W.
2044 Longfellow Street NE
Canton, OH 44721

Thomas, Forest W.
211 Melbourne Ave
Akron, OH 44313

Thomas, Nicholas S.
30215 Ashton Lane
Bay Village, OH 44140

Thombs, Ora E.
828 Eastview Ave
Wadsworth, OH 44281

Thornburg, John R.
4640 Taray Lane
Holiday, FL 34690

Tobias, John D.
2517 Enclave Street, NW
Uniontown, OH 44685

UnitedHealth Group
PO Box 29875
Hot Springs, AR 71903-0875

UnitedHealthcare
AARP - Group Retiree Services
PO Box 371362
Pittsburgh, PA 15250-7362

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VSP
3333 Quality Drive
Rancho Cordova, CA 95670

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Welch III, Frederick S.
1519 Artman Ave
Akron, OH 44313

Wenger, Paul J.
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Louisville, OH 44641

West, Ruth M.
15539 Hatfield
Rittman, OH 44270

Williams, David
705 Robins Gate
Akron, OH 44319

Wise, Kathleen
8587 Tanglewood Trail
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Wright, James R.
1251 Delia Avenue
Akron, OH 44320

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